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CONFIRMATION NO. 1550

Bib Data Sheet

SERIAL NUMBER 10/604,551	FILING DATE 07/30/2003 RULE	CLASS 347	GROUP ART UNIT 2853	ATTORNEY DOCKET NO. 3002
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APPLICANTS
Robert Ehrhardt, Palatine, IL;

** CONTINUING DATA *****
NA 00

** FOREIGN APPLICATIONS *****
NA 00

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 06/08/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 5	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature _____ Initials <u>ME</u>			

ADDRESS
00826
ALSTON & BIRD LLP
BANK OF AMERICA PLAZA
101 SOUTH TRYON STREET, SUITE 4000
CHARLOTTE, NC
28280-4000

TITLE
Label Printer with Label Edge Detector

FILING FEE RECEIVED 1002	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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